Patient Flow Analysis

Personal IDentification Code _____

Official Designation Code _____

Clinic Task Assigned Code _____

Time you are ready to serve patients _____

HR : MIN

Break Times (Fifteen minutes or more)

Time Out: from

Time In: to

Time you are no longer available to serve patients_____

IF IN TRAVEL STATUS IN ORDER TO WORK IN THIS CLINIC

Miles Traveled (round trip)_____

Mileage Rate (cent/mile)_____

Time in Travel Status (minutes)_____

SOURCE OF FUNDS FOR YOUR SALARY (code)_____

GROSS SALARY_____

DAYS OF PAID SICK & ANNUAL EARNED PLUS HOLIDAYS_____

FRINGE BENEFITS_____

HOURS IN A NORMAL WORK WEEK_____